EXHIBIT A

The State of New Hampshire

THE STATE OF NEW HAMPSHIRE, Rockingham County
HAMPTON DISTRICT COURT

130 LEDGE RD.
SEABROOK, NEW HAMPSHIRE 03874
603-474-2637

Gase Number <u>-06-5C-129</u>

Name Scott Blood	
Name OCOTTO	
Street/No. 21 Stack 2d PO Box 188	PLAINTIFF
City/State: HOMOTO +70 11 Octo	رما مودو به وجه وربخ د ورد الحول الرابع السائلة المستصفية والمائلة المائلة
The Plaintiff claims that the Defendant named below owes the Plaintiff	s Allah O
because (description of the claim): Scott Blood 15 asking	Amounti
Mega Life and Health Insurance Comp	
	idiance for Health
Money that was given 3 months in a Insurance This policy was Started in	
Soft Never recieved His Cards or p	olicy with ten day
Scott Never recieved His Cards or p Grace per of 1411 100 until December	05,2005
Amount of Claim \$ 110711.00	1 00 00
Court Costs \$	16 Aroth Klingd
Date	Plaintiff's Signature
INSTRUCTIONS	
If you wish to have a hearing on this matter, you must check either Section A cyour signature and address at the bottom. FOLLOW THE DIRECTIONS FOR THE	or Section B below, enter the date, and SECTION YOU CHOOSE.
IT SECTION ALDISTRICT COURT HEARING BEFORE A JUDGE	•
If you wish to have a hearing in District Court, check this box, complete the Court Clerk by the RETURN DATE on the front of the complaint:	bottom of this form, and return it to the
The Court will let you know when the hearing will be held.	
SECTION B: SUPERIOR COURT TRIAL BY JURY	***
If this claim is for more that \$1,500, or the title to real estate is involvitransferred to the Superior Court for a jury trial. YOU MUST: (1) check this box; (ed you may request that the claim be
include \$90.00 (DO NOT MAIL CASH) for the transfer fee; and (4) return the for	m and the \$90.00 to the District Court
Clerk by the RETURN DATE on the front of the complaint. If year do not include be scheduled for hearing before a judge in the District Court.	te the \$90.00 transfer fee, your case will
Janes	1861 If welfooth Innance Co.
4-25-66 For The M	1001 The energy and the contraction.
Date Signature	
9151 Box 1	wand 26
Address	
9151 Bowle Address N.Richland	Hills TI 76190
N.KICHUMA City	State Zip
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